

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1X	2851	5/29
O.I.P.E. CLASSIFIER			7/15/00
FORMALITY REVIEW		65955	5/8
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date	
Final	4	8
Original	3	6
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Claim	Date	
Final	51	
Original	52	
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Claim	Date	
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Original	102	
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If more than 150 claims or 10 actions  
staple additional sheet here

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